

## ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO.   | DATE     |
|---------------------------|----------|----------|----------|
| FEE DETERMINATION         | X:       | 01-14104 |          |
| O.I.P.E. CLASSIFIER       | L3       | 2/20/61  |          |
| FORMALITY REVIEW          | RY       | 12.2     | 65-28-21 |
| RESPONSE FORMALITY REVIEW | AP       | 9.7      | 63-01-02 |

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim    | Date   |
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| Final    |        |
| Original |        |
| 1 ✓      | 1/2/63 |
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| Claim    | Date |
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| Claim    | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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